IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / CERTIFICATE OF COMPLETION / OPERATION PERMIT / EXISTING SYSTEM INSPECTION

PROPERTY DESCRIPTION NO. 23526 DATE 4-22-96 TAX MAP NO. 3Q-1-C-2 Watershed ☐ Yes ☐ No

OWNER OR CONTRACTOR VIRGINIA EADES PHONE: Business Home 528-6126

ADDRESS 142 AMBER LANE, STATESVILLE NC 28677

LOCATION BUFFALO SHOALS ROAD 36, TL ELFORA ROAD, TR AMBER LANE, AT END ON RIGHT

SUBDIVISION R.T. EDSON BLOCK / SECTION LOT 2 LOT AREA LIMITED SITE CLASS PS DESIGN FLOW 240 L.T.A.R. EXISTING

Septic Tank: EXISTING Gallons: STB Date

Pump Tank: Gallons: PT Date

Pump Make: Model Serial No

Nitrification Field: No Fields Square Feet Linear Feet EXISTING

No Lines Trench Width Max Trench Bottom Depth Gravel Depth

☐ New System ☐ Repair System Type I II III IV V VI

System Description: CONVENTIONAL GRAVITY

Repair System Description:

Maintenance Agreement Required: ☐ Yes ☐ No

☐ House/Mod Home No. Bedrooms 2

☐ Mobile Home No. Bathrooms 2

☐ Business No. Employees

☐ Other

☐ Slab ☐ Crawl Space ☐ Basement w/plumbing ☐ Basement wo/plumbing

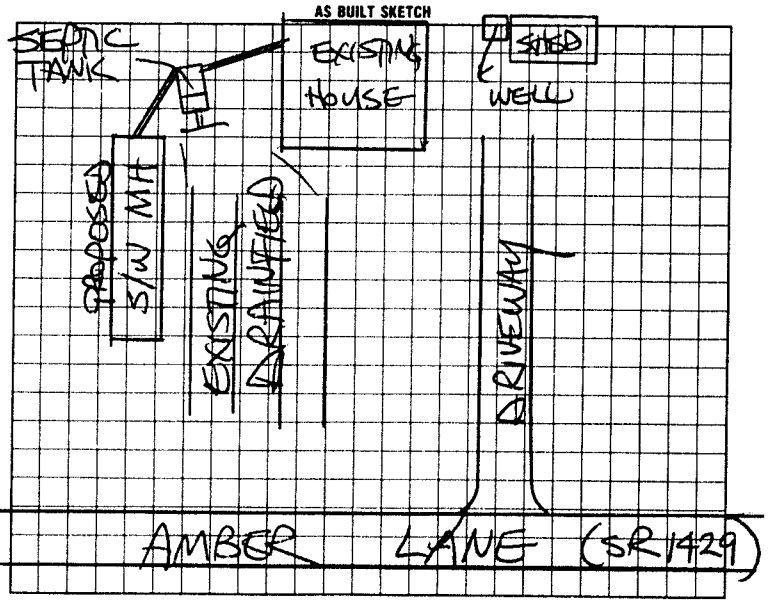
Water Supply:
☑ Individual
☐ Community
☐ Public
WELL

Comments:

Comments:

INITIAL SITE SKETCH

AS BUILT SKETCH



I understand that this permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system

Signed:

Improvement Permit by: date

Existing System Inspection by: STEVE HEDRICK date 4-22-96

Installed by

Certificate of Completion by date

Operation Permit by date

HEALTH DEPT. COPY: WHITE INS. ECTION COPY (FINAL) GREEN OWNER COPY (FINAL) YELLOW INSPECTION COPY (INITIAL) PINK OWNER COPY (INITIAL) GOLD